

MAXIOCEL-100% CHITOSAN WOUND DRESSING ON A CARBUNCLE WOUND

Center

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Patient details	49 years , Male
Diabetes	No
Nicotine consumption	No
Localized infection	Yes
Nutritional status	Well nourished
Co-morbidities	None
Current medication	Localized treatment with saline and gauze
Wound history	Patient suffering from an exudating Carbuncle wound on left shoulder from a period of 1 month with measurements being L=80mm,D=10mm and W=60mm

Initial wound bed evaluation

Infection (Local Factors)	Yes	No	Exudate	Dry	Low	Medium	High	
Exudate			Levels					
Erythema			Exudate	Watery	Cloudy	Thick	Purulent	Red
Malodorous			Type					
Pain								
Oedema								

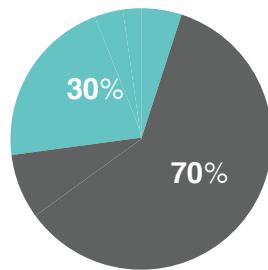


Wound before MaxioCel treatment



Wound after 14 days of MaxioCel treatment

Tissue type



- Necrotic
- Sloughy
- Granulating
- Epithelialising

Wound management goals

Parameters	Yes	No
Debridement		
Infection prevention		
Exudate management		
Optimum moisture maintenance		
Protect granulation tissue / Epithelializing tissue		

End report

No of MaxioCel dressings done	7
Frequency of MaxioCel dressings	Alternative days
MaxioCel variant used	MX1010
Final day wound condition	Exudate levels significantly reduced, wound has granulated and margins contracted to 1/4th the size.

Result

Patient Outcome with MaxioCel	Ease of Application / Removal	Anti-microbial barrier	Wound adherence	Conformability	Wound scar improvement	Pain management
Excellent						
Good						
Fair						
Poor						

Discussion

- A carbuncle is a cluster of boils that form a connected area of infection. Carbuncles often occur at the back of the neck, shoulder or thighs.
- People suffering from Carbuncle wounds often feel unwell and may require proper systemic treatment along with the localized treatment of the wound.
- In the shown case, the wound debridement had already been performed multiple times, the prime objective was infection prevention and promotion of faster healing.
- MaxioCel dressings were initiated as the treatment regimen and within 7 dressings (alternative days) over a period of 15 days, significant reduction in wound size and exudates were observed.